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Γ	Under the Paper	ATENT APP	LICATI	ON EEE DE	required to respon	nd to a collection of	information un	less it dis	. DEPARTMENT Plays a valid OM	OF COMME
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information and PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application of Docket Number		
	CLAIMS AS FILED - PARTI								470	UGG/
	(Column 1) (Column 2)					SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
F	. FOR IASIC FEE	. · NU			MBER EXTRA	RATE	FEE	1	RATE	55.5
. (37 CFR 1.16(a))		* : .				1		10116	FEE
٦.	OTAL CLAIMS 17 CFR 1.16(c))		minus 20 =			X 1 =		OR		-
	NOEPENDENT CL 37 CFR 1.16(b))	AMS	minus 3 =			X 1 =	 	OR	X 5=	
M	OUTIPLE DEPEND	DENT CLAIM PRES	ENT	(37 CFR 1.16(d))		+5 =	 	OR	X S=	
•	If the difference in	oolumn t is less	than zero	enter "0" in colum	20.7	- 		OR:	+\$=	
					ui Z	TOTAL] OR-	TOTAL	
	8-12 N	CLAIMS AS A	MENDE	D – PART II						
<u> </u>	J. 1-00	(Column 1)		(Column 2)	(Column 3)	SMALL	ENTITY	OR		R THAN ENTITY
170		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
Ž	Total (37 CFR 1.16(c))	11	Minus		=	X \$ =	FEE			EE
AMENDMENT	Independent (37 CFR 1,16(b))	2	Minus	3	-			OR	x·s=	
2	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			DENT CLAIM (37)	FR 1 16(a))	X S =		OR	X 5=	
_	_ <u></u>			(3.1	S. V. 1,10(0))	TOTAL		OR	total =	
						ADD'L FEE	L_ /]	OR	ADO'L FEE	$\sqcup \downarrow$
-	T	(Column 1)	T : -	(Column 2)	(Column 3)		:			1
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AMENDMENT	Total (a) CFR t_(e(c))		Minus .		=	X 5 =	- 100			FEE
I S	Independent (37 CFR 1,16(b))	•	Minus	***	= .	X 5 =		OR	X \$=.	
2	FIRST PRESCRIPTION OF MULTIPLE DEPENDENT CHAIN (1) CER 1 15(c);							OR	X S =	
_						101AL		OR	+ s =	
		(Columa 1)		_		ADO'L FEE [OR	ADD'L FEE	
1		CLAIMS REMAINING	I	(Column 2) HIGHEST	(Column 3)			ſ	 -	
AMERICANT		AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TADNAL FEE		RATE	ADDI- TIONAL
<u>5</u> ≥	Total (3) CFR 1,16(c))	•	Minus		=	X 1 =				FEE
	Independent (37 CFR t 16(b))	•	Minus	***	=	X 1 =		OR .	X S =	
<u> </u>	FIRST PRESENT	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR + 16(d))						OR	X S=	····
					1	101AL 400.1 LEE		OR [+ s =	
	" If the entry in co	TURBUCH LAGRADUSE	ノレンパトへん	THE THIS COVEC		C		Ott	ADD'L FEE	
• •						nter 20 er 73". I number found in ti				

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to fife (and by the public which is to fife (and by the public which is to fife (and by the including gathering, preparing and submitting the complete application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, OO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.